

Presentation on the Conference on neonatal screening Marrakech, Morocco 2006

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Content

- Health Policy Context
- · Strengths and limitations of Screening
- · Key issues in the EUs public health approach
- Overview on upcoming topics in FP 7

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WILLENNIUM DEVELOPMENT GOALS TO BE ACHIEVED BY 2015

- HALVE EXTREME POVERTY AND HUNGER
 1.2 billion people still live on less than \$1 a day, But
 43 countries, with more than 60 per cent of the
 world's people, have already met or are on track to
 meet the goal of cutting hunger in half by 2015.
- ACHIEVE UNIVERSAL PRIMARY EDUCATION 113 million children do not attend school, be goal is within reach; India, for example, shou 95 per cent of its children in school by 2005.
- EMPOWER WOMEN AND PROMOTE EQUALITY BETWEEN WOMEN AND MEN Two-thirds of the words illiferates are women, and 80 per cent of its refugees are women and children, since the 1997 Microcredit Summit, progress has been made in reaching and empowering poor women, nearly 19 million in 200 alone.
- REDUCE UNDER-FIVE MORTALITY BY TWO-THIRDS
- on young children die every year, but that is down from 15 million in 1980.

- REDUCE MATERNAL MORTALITY BY THREE-
- In the developing world, the risk of dying in child birth is one in 48. But virtually all countries now have safe motherhood programmes and are poised for progress
- REVERSE THE SPREAD OF DISEASES, ESPE-CIALLY HIV/AIDS AND MALARIA
- Killer diseases have erased a generation of development gains. Countries like Brazil, Senegal, Thailand and Uganda have shown that we can stop HIV in its tracks.
- ENSURE ENVIRONMENTAL SUSTAINABILITY than one billion people still lack access to saf ng water; however, during the 1990s, nearly illion people gained access to safe water and ny to sanitation.
- CREATE A GLOBAL PARTNERSHIP FOR DEVEL-OPMENT, WITH TARGETS FOR AID, TRADE AND DEST TRELIEF Too many developing countries are spending more on debt service than on social services. New aid commitments made in the first half of 2002 alone. Though, will reach an additional \$12 billion per year

The context of public health interventions for child health:

What is your coverage for

- Childhood vaccinations?
- Skilled delivery attendance?
- · Antenatal care?
- Syphilis screening?
- HIV screening and PMTCT?
- Growth monitoring (road to health chart)?

Special features of screening versus "traditional treatment":

- Screening is directed the "healthy"
- The demand for screening is induced by the health sector
- The validity of the screening test is crucial

Screening: Winners and losers Target condition present Target condition absent Loser: false positive Winner: true positive early treatment unjustified worries Test + prevention follow-up investigations unnecessary and possibly harmful treatment Loser: false negative Winner (?): true negative certificate of health effect reassurance underestimation of symptoms - delayed or no treatment

• More losers possible through direct side effects of the test

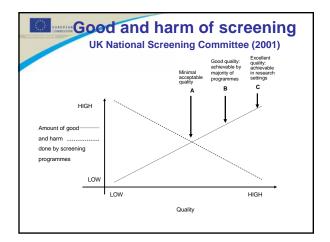
Key Issues in EU-funded public health research

- Global commitments (MDGs)
- Evidence-based approaches
- · Patients safety/ quality assurance
- Ethics and patient's rights
- Universal access

Evidence-based approach

"The evidence appears to support the introduction of tandem MS into a UK screening programme for PKU and MCAD deficiency combined"

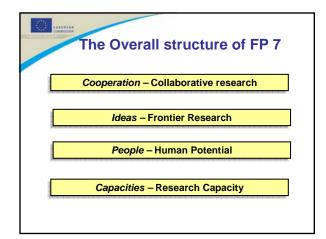
Health Techn. Assessment (2004) 8;12 NHS R&D HTA programme



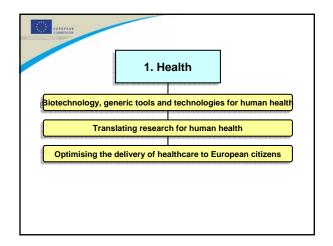
Informed decision

"The public should be given a realistic view of the merits and flaws of screening so that they can make an informed choice and decline an invitation"

(UK National Screening committee 2000)







COOPERATION International Collaborative research the dual approach

1. OPENING OF ALL THEMES TO THIRD COUNTRIES

("Opening" in FP 6)

2. SPECIFIC INTERNATIONAL COOPERATION ACTIONS (SICA) in the THEMES



International Cooperation in "Cooperation"

Specific international co-operation actions (SICA) in each thematic area dedicated to ICPC:

- Dedicated calls or separate dedicated parts of calls targeted to ICPC countries within each and every theme
- > The rule of 2 + 2 applies
- > Specific evaluation criteria such as "impact"
- The same concept and principles as INCO in FP6 now to be implemented by the Themes
- ❖ However, INCO focused on only 3 Themes

International Scientific Cooperation

Who are the "Third Countries"

- Industrialised countries
- Associated countries

International Cooperation Partner Countries (ICPC)

- Mediterranean partner Countries,
- Western Balkans,
- Eastern European and Central Asian countries
- ACP, ASIA, Latin America



- Biotechnology, generic tools and technologies for human health
- Overarching topic on Child Health
- Research on the brain and related diseases, human development and ageing
 - Translational research in major infectious diseases: to confront major threats to public health
 - Anti-microbial drug resistance
 - HIV/AIDS, malaria and tuberculosis
 - Emerging epidemics

Tentative broad areas in FP 7

- Optimising the delivery of health care to European citizens
 - Enhanced health promotion and disease prevention
 - Translating clinical research into clinical practice including better use of medicines, and appropriate use of behavioural and organisational interventions and health therapies and technologies
 - Quality, solidarity and sustainability of health systems



Tentative broad areas in FP 7

Specific International Cooperation Actions (SICA)

- Health care system, policy and management
 - Health care intervention research
 - optimising hospital care
- First calls to published Dec. 2006



Thanks for your attention!

Further Information and contact:

- •Framework Programmes: www.cordis.lu
- •FP7: http://europa.eu.int/comm/research/future

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